



**City and County of San Francisco**  
**Department of Public Health**  
BEHAVIORAL HEALTH SERVICE  
SUBSTANCE USE DISORDER SERVICES

May 30, 2019

**AVAILABILITY OF SUBSTANCE ABUSE TREATMENT IN SAN FRANCISCO**

The Department of Public Health, Behavioral Health Service, funds, supports and oversees a broad network of approximately 45 community-based substance abuse treatment programs. The funded capacity for FY 2018-2019 listed below indicates changes in funding this year.

Modality	FY17-18 Beds	FY18-19 Beds	Increase/ (Decrease)		FY17-18 Funding	FY18-19 Funding	Increase/ (Decrease)
Residential & Residential Step Down	377	491	114		\$ 15,792,806	\$ 17,374,155	\$ 1,581,349
Residential Detox	51	51	-		\$ 4,592,344	\$ 5,184,072	\$ 591,728

Modality	FY17-18 UDC	FY18-19 UDC	Increase/ (Decrease)		FY17-18 Funding	FY18-19 Funding	Increase/ (Decrease)
Outpatient, Intensive Outpatient & Case Mgmt	8,797	3,016	(5,781)		\$ 7,970,137	\$ 8,554,008	\$ 583,871
Narcotic Treatment & Medication Assisted Treatment	4,237	4,052	(185)		\$ 18,345,103	\$ 19,284,629	\$ 939,526

Currently the access to substance abuse treatment in San Francisco is better than at any time in the past.

There is no wait for:

Narcotic Replacement Treatment,  
Residential Treatment (individuals),  
Perinatal Residential Treatment.  
Residential Step Down (available to individuals in outpatient treatment)

Available within a day (usually)

Withdrawal Management (Detox) Residential  
Withdrawal Management (Detox) Outpatient  
Medication Assisted Treatment

1-2 Week wait for:

Outpatient Treatment  
Intensive Outpatient Treatment  
Case management  
Intensive case management

San Francisco's treatment system is large enough that there are treatment openings every day. The department exercises immediate priority placement for acute and sensitive cases. The continuous easy entry into Narcotic Replacement Treatment and newer Medication Assisted Treatment programs has had a moderating effect on the demand for residential treatment. Housing is still a major problem for most substance use treatment clients.

As of May 1, 2018, The Department began to bill Drug Medi-Cal (federal Medicaid) for residential treatment for the first time ever. As of July 1, 2019, the Department will expand billing for Outpatient Treatment, Intensive Outpatient treatment, and Case Management. Physician phone consultation is available to other physicians with substance abuse clients. The Department anticipates that additional Drug Medi-Cal revenue should reduce the need for waiting lists for all services over the next several years.

The following medications have been added to Narcotic Treatment Programs and several other outpatient clinics: Buprenorphine as an alternative to methadone; Naltrexone to reduce craving; Disulfiram as an adjunct to methadone or buprenorphine to reduce alcohol consumption. Naloxone is distributed to clients for use at later times as needed to enable individuals to reverse the potentially fatal effects of narcotic overdose.